LIFETIME LICENSE APPLICATION GRATIS LICENSE & DISABILITY LICENSE APPLICATION



SCDNR, PO Box 11710, Columbia SC 29211

Lifetime Licenses available to South Carolina residents only. Resident means any person who is a citizen of the United States and who has been a domiciled resident of the state of South Carolina for a period of 180 consecutive days or more immediately prior to the date of application for license. A copy of a South Carolina driver's license or reasonable proof of residency must accompany application. (Ownership of property or payment of property taxes or both does not necessarily constitute residency.) Please type or print:

APPLICANT'S NAM	ME Last	First	Initial
ADDRESS Street		City	, SC Zip Code
	(If Post Office Box is given, list actual street location also)		_
DATE OF BIRTH	Month Day Year	SOCIAL SECURITY NO	Required
SC DRIVER'S LICE	NSF NO (enclose copy)	RACE SEX	Male Female
COUNTY OF RES	INSE NO. (enclose copy)IDENCE	TELEPHONE NUMBER	
	SHING		\$300.00
	UNTING (Small Game Only)		
	OMBINATION (Under 2 years of age)		
	OMBINATION (2 to under 16 years of ag		
	OMBINATION (16 to under 64 years of a		
	ETIME LICENSE required of all invididu	•	
WMA Permit. Combinate licenses for all persons und	listed above do not include (except Senior Lice ion License includes fishing, hunting & big gan der 16. Hospital copies will not be accepted and s as the Gratis over 65 or senior lifetime license	ne only. A copy of a certified birth certificate n d copies of birth certificates cannot be return	nust accompany applications for lifetime
Senior Lifetime License includes hunting, freshwater fishing, saltwater fishing, big game WMA, and state duck stamp.			
Hunter Education is required for persons born after June 30, 1979. If you have completed a Hunter Education course, show state and Hunter Education			
number. STATE HUNTER EDUCATION NO I understand that persons whose privileges are suspended are not eligible to apply for, hold, or use SCDNR licenses, permits, stamps, or tags and that the information			
I understand that persons whose privileges are suspended are not eligible to apply for, hold, or use SCDNR licenses, permits, stamps, or tags and that the information provided above is true and correct.			
			COL 1 #
	Signature of Applicant		
MAKE CHECK PAYABLE & MAIL TO: South Carolina Wildlife Endowment Fund, SCDNR, PO Box 11710, Columbia, SC 29211.			
	Complete personal information above and	return entire page to address listed at the top	of form.
GRATIS LICENSE for persons 65 or older born on or before 7/1/1940 only (submit a copy of your SC driver's license)			
GRATIS LICENSE FOR DISABLED PERSONS (See criteria below.)			
be totally disabled under or	-510 (16) provides that any person who has been ne of the programs listed below, may obtain a sta r renewal. <u>Any person with quadriplegia or para</u> <u>ued, will be permanent.</u>	tewide fishing and hunting license. It is valid	only for three years and disability recerti-
	n below that has certified you as disabled a eceived without such documentation will be ret		n agency certification to this form.
Social S	Security Administration*	Federal Civil Serv	
	re Retirement System	Railroad Retireme	
US Dep	ot. of Veterans Affairs	Medicaid Assistan	ice
*If you are currently receiving disability benefits from Social Security, please attach a current copy of your <u>Benefits Verification Statement</u> to this application. You may request the <u>Benefits Verification Statement</u> from <u>Social Security</u> by calling toll free 1-800-772-1213.			
I understand that persons whose privileges are suspended are not eligible to apply for, hold, or use SCDNR licenses, permits, stamps, or tags and that the information provided above is true and correct.			
Applican	t's Signature	Date	